

Gender analysis checklist for health within a programme or project cycle

Ensuring that gender considerations are accounted for throughout the programme or project cycle requires consideration of key issues and questions at each stage. Reflecting on the results of this checklist will indicate if and where the programme or project cycle's proposals (for objectives, activities and mechanisms for engagement and analysis) should be modified and improved to maximise the participation of men and women and thus the effectiveness of the programme or project. The programme or project cycle described below aligns to the seven steps suggested in 'Mainstreaming climate change into development in the Pacific: A practical guide' (PACC, 2014).

Phase 1: Preparatory

Institutions and governance

- Describe the current bodies or committees that deal with health management. Is there gender balance in these bodies? How gender sensitive are the people or groups represented here?
- Describe the mechanisms that already exist to ensure balanced representation of different groups (men, women, youth, elders, people with disabilities) within these structures.
- Describe the mechanisms that will be used to raise awareness and share information on health (including climate-sensitive diseases) equally within the community.
- Identify the type of scientific information, epidemiological data and socio-economic analysis needed to inform the programme or project. What expert support may be needed to ensure that gender considerations are addressed adequately?
- Identify how social structures (such as traditions, governance, religion, rights, status of groups) promote or impede men's and women's health and well-being, and their ability to cope and recover from illnesses and injuries.

Phase 2: Situation Analysis and Phase 3: Problem Analysis

Policies, plans, strategies

- Are gender issues in relation to climate-sensitive diseases and health clearly identified and addressed in current policies, programmes and institutional arrangements? How?
- What existing health plans and policies exist? To what extent do these reflect climate risk, health equity and gender equality commitments? Do these policies and plans contribute to addressing gender issues in relation to access to resources necessary for responding to climate-sensitive diseases (e.g. access to doctors and nurses public/private/community-based health care, hospital, medicine, specialist medical services, etc.)?

Conduct an initial stocktake of roles and responsibilities – who is doing what in the following areas?

- Identify the local employment and income-generating activities. Who (women or men) does what?
- Identify the historical and predicted impact of climate-sensitive diseases on women's and men's activities and way of life.
- Identify what activities are usually carried out by men and women to reduce the risks associated with climate-sensitive diseases.

Knowledge and skills – who knows what and who can do what?

- Identify and describe what knowledge and skills men and women possess and use to reduce the potential impacts of natural hazards.

Access to (use rights) and control of (decision-making rights) resources – who controls what?

- What are the different levels of control over resources for women and for men? Who has access to and control over such things as financial resources to pay for medication and treatment, technology and communication resources used to seek medical assistance and to obtain information about health, and vehicles that can be used to transport sick or injured people?

Climate risk – who faces which impacts?

- Identify, on the basis of roles and responsibilities, the specific health risks sensitive to climate change.
- Who (men and women) bears these risks? What risks do men identify as most serious? What risks do women identify as most serious?

Knowledge gaps

- Are sex-disaggregated data or indicators available for climate-sensitive diseases (e.g. malaria, dengue fever, diarrhoea, typhoid fever, leptospirosis)? If so, what information do they provide?
- What information is needed to complete a gender analysis? How will the information gaps be filled during the planning phase?

Gender analysis checklist for health within a programme or project cycle

Phase 4 Solution Analysis and Phase 5: Design

Needs – who needs what and for what?

- How do project activities and objectives adequately address the health priorities and needs of men and women? What mechanisms were used to identify these needs and priorities?
- What resources do men and women need to anticipate and respond to climate-sensitive diseases? How might current differences in the ability of men and women to access these resources affect options and design?
- What might be the consequences of lower access, for women and men, to resources needed for managing health risks, for example lack of income, limited decision-making powers, increased time spent working?
- What are the expected benefits and opportunities that the project will generate? Are some more accessible for women than men and vice versa (such as improved information relating to health risks, training, increased time availability)?

Knowledge and skills – who needs to know what to reduce health risks?

- What capacity building needs in relation to health management were identified? By whom?
- Will the project provide training, awareness and education to enhance the current skills and knowledge of men and women? What mechanisms will be used to ensure that men and women contribute and benefit equally? (Note: this is especially relevant if one group is perceived as having the main role in health management at household or community level.)

Phase 6: Implementation, Monitoring and Evaluation

Implementation

- Did the implementing partners express their commitment to achieving gender equality?
- Do they have skills, resources and capacity to implement programmes using gender-responsive approaches? If not, include capacity building for partners at the outset.
- Describe the mechanisms being used to ensure the full and active participation of men and women at all stages of the implementation process.
- Describe how any specific measures to address gender issues identified during the planning phases will be resourced and their implementation tracked.

Monitoring and evaluation

- Through the use of sex-disaggregated indicators and specific tools, the monitoring and evaluation framework should allow us to track the following issues:
- How the programme or project addressed women's and men's needs.
- The impact on women's and men's workloads in relation to health management and caring for sick or injured family members.
- Capacities and knowledge developed by women and men to reduce health risks and how they are using this to strengthen resilience at the national, community and household levels.
- Reduction in gender and health inequalities, for example in terms of access to health services and information, necessary for people's holistic health and well-being.
- The overall impact of the programme or project on women's and men's vulnerability to climate change and climate-sensitive diseases.